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nd to a collection of information unless it disclays a valid O'-18 control number Application Number 10673531 **REVOCATION OF POWER OF** Filing Date **ATTORNEY WITH** First Named Inventor **NEW POWER OF ATTORNEY** Art Unit AND Examiner Name **CHANGE OF CORRESPONDENCE ADDRESS** Attorney Docket Number I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith. OR 66547 I hereby appoint the practitioners associated with the Customer Number Please change the correspondence address for the above-identified application to: The address associated with 66547 **Customer Number:** OR Firm or Individual Name Address Çity State Zip Country Telephone Email I am the: Applicant/Inventor Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name President of Samsong Electronics Co., Ltd. Date Telephone NOTE. Signatures of all the inver-algrature is required, see below: or assignates of record of the entire interest at their representative(s) are required. Submit multiple forms if more than one forms are submilled

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